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SUMMARY OF KEY SUBSTANTIVE AND MINOR REVISIONS

Section	Description	
Application a 19	215(c) Home and Community-Based Services Waiver	
2.	 Change Division of Intellectual Disability Services to Department of Intellectual and Developmental Disabilities throughout waiver. Replace DIDS with DIDD throughout waiver. Delete vehicle accessibility modifications from brief waiver description. Replace mental retardation with intellectual disability(ies) throughout waiver. Change ICF/MR to ICF/IID throughout waiver. 	
	Clarify that case manager face-to-face monitoring visits occur quarterly (not monthly) or as needed by the person supported, throughout waiver. The frequency of said visits shall be specified in the plan of care/ISP.	
6.1.	Replace Advisory Council with Statewide and Regional Planning and Policy Councils throughout waiver.	
7.B.	Change state operating agency representative	
Appendix A: Waiver Administration and Operation		
5. and 6.	Revise uniform assessment to include Inventory for Client and Agency Planning (ICAP) and Supports Intensity Scale (SIS) throughout waiver.	
Appendix A: Waiver Administration and Operation Quality Improvement: Administrative Authority of the Single State Medicaid Agency		
a.	Revise Performance Measure AA a.i.4.	
a.	Delete Performance Measure AA a.i.5.	
b.	 Replace Deputy Commissioner with Commissioner throughout waiver. Replace Assistant Commissioner of Policy and Planning with DIDD Deputy Commissioner of Policy and Innovation throughout waiver. 	
Appendix B: Evaluation/Reevaluation of Level of Care Quality Improvement: Level of Care		
a.	 Delete Performance Measure LOC a.i.c.2. Delete Performance Measure LOC a.i.c.4. Delete Performance Measure LOC a.i.c.5. 	

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Appendix C: Participant Services		
C-1/C-3 Service Specification		
Respite Definition	 Clarifies prohibition against receiving services during the same time as services provided under a 504 Plan or Individual Education Program (IEP), when the person is being homeschooled, or is receiving Day or PA Services. 	
Day Service Definition	Strengthened the Day Services definition by clarifying the department's expectations for providers; permits 'retirement' activities such as community/public events and hobbies.	
	Permits providers to deliver facility-based services in community locations.	
	Deletes confusing examples of hypothetical situations.	
	Replaced the exception process to receive community-based day services at home and added a new day service called In-home Day Services.	
	Persons-supported could receive an annual maximum of 243 days of day services, which would include community-based, facility-based, in-home, and supported employment.	
	Deletes requirement that reimbursement for combination of services is based on first six (6) hours of services received that day.	
	Clarifies prohibition against receiving services during the same time as services provided under a 504 Plan or Individual Education Program (IEP), when the person is being homeschooled, or is receiving Respite or PA Services.	
Personal Assistance Definition	Clarifies prohibition against receiving services during the same time as services provided under a 504 Plan or Individual Education Program (IEP), when the person is being homeschooled, or is receiving Day or Respite Services.	
Semi- independent Living	Creates a new service named Semi-independent Living	
Provider Specifications	Indicates the Department of Intellectual and Developmental Disabilities will be acting as an Organized Healthcare Delivery System for the following services: Specialized Medical Equipment, Supplies, and Assistive Technology Dental Services Behavior Services Nutrition Services Occupational Therapy Physical Therapy	
	Speech, Language and Hearing Services	

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C-2 d. General Service Specifications

Provision of Personal Care of Similar Services by Legally Responsible Individuals

Relative Caregivers

- Specifies that providers who are family members are required to implement services as specified in the individual support plan (ISP).
- Creates reimbursement limit to providers related to the person supported of forty (40) hours per week per family member.
- Specifies that the person's Circle of Support is responsible for determining if the use of providers who are family members is the best choice for the person supported.

Appendix C: Participant Services

Quality Improvement: Qualified Providers

- Revise Performance Measure QP a.i.a.1.
- Delete Performance Measure QP a.i.a.2.
- Revise Performance Measure QP a.i.a.11.
- Delete Performance Measure QP a.i.a.12.
- Delete Performance Measure QP a.i.a.13.
- Delete Performance Measure QP a.i.a.14.
- Delete Performance Measure QP a.i.a.15.

Appendix D: Participant Centered Planning and Service Delivery Service Plan Development

D-1 c.

• Change Family Handbook to Family Resource Guide throughout waiver.

Appendix D: Participant Centered Planning and Service Delivery

Quality Improvement: Service Plan

- Delete Performance Measure SP a.i.a.1.
- Revise Performance Measure SP a.i.a.2.
- Delete Performance Measure SP a.i.a.3.
- Delete Performance Measure SP a.i.b.4.
- Delete Performance Measure SP a.i.b.8.

Appendix E: Participant Direction of Services

 Delete inaccurate references to independent advocacy services available through a sub-contract managed by the Financial Management Services/Supports Brokerage entity.

Appendix G: Participant Safeguards

Quality Improvement: Health and Welfare

- Delete Performance Measure HW a.i.5.
- Delete Performance Measure HW a.i.6.
- Delete Performance Measure HW a.i.7.
- Revise Performance Measure HW a.i.8.
- Revise Performance Measure HW a.i.9.

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	Revise Performance Measure HW a.i.10.	
	Revise Performance Measure HW a.i.11.	
	Revise Performance Measure HW a.i.14.	
	Delete Performance Measure HW a.i.15.	
	Delete Performance Measure HW a.i.16.	
Appendix G-2: Safeguards Concerning Restraints and Restrictive Interventions		
a. ii.	Change Director of Behavior Services to Director of Behavior and	
	Psychological Services.	
Appendix H: Quality Improvement Strategy		
H-1 Systems Im	provement	
b. i.	Change TennCare Director of MR HCBS Waiver Programs to TennCare	
	Director of Quality and Administration-Intellectual Disabilities Services.	
Appendix I: Fina	ancial Accountability	
I-2 Rates Billings and Claims		
b.	Remove provider choice for receiving payment from DIDD.	
Appendix I-3: Financial Accountability		
g.i.	Change to No –The state does not provide that providers may voluntarily	
	reassign their right to a direct payment to a governmental agency.	
g.ii	Change to Yes - The wavier provides for the use of Organized Healthcare	
9.11	Delivery System arrangements under the provisions of 42 CFR 447.10.	
g.ii.	Add the following clinical services to Organized Healthcare Delivery System:	
9	Specialized Medical Equipment, Supplies, and Assistive Technology	
	Dental Services	
	Behavior Services	
	Nutrition Services	
	Occupational Therapy	
	Physical Therapy	
	Speech, Language, and Hearing Services	
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